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## FEC FORM 2 STATEMENT OF CANDIDACY



	2010 1611 - 6 111 32 51			
1. (a) Name of Candidate (in full) DAVID FRANK				
(b) Address (number and street) Check if address changed  CO 2110 ARTESIA BOLLEVARD #518	2. FEC Candidate Identification Number 870718470			
(c) City, State, and ZIP Code REDONDO BEACH, CA, 90278	3. Is This New Amended Statement (N) OR (A)			
	State & District of Candidate USA & WASHINGTON, D. C.			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE				
7. I hereby designate the following named political committee as my Principal Campaign Committee for the (year of election) (year of election)				
(a) Name of Committee (in full)				
DAVID FRANK FOR PRESIDENT, INC.				
(b) Address (number and street)				
C/O 2110 ARTESIA BOULEVARD #518				
(c) City, State, and ZIP Code				
REDONDO BEACH, CA, 40278				
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)  8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.  NOTE: This designation should be filed with the principal campaign committee.				
(a) Name of Committee (in full)				
(b) Address (number and street)				
(c) City, State, and ZIP Code				
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.				
Signature of Candidate  TRAUK	Date 22 DECEMBER 2017			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.				

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

Page <u>2</u> of <u>2</u>

## **DESIGNATION OF OTHER AUTHORIZED COMMITTEES**

(Including Joint Fundraising Representatives)

8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.		
	(a) Name of Committee (in full)		
	(b) Address (number and street)		
	(c) City, State, and ZIP Code		
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.		
	(a) Name of Committee (in full)		
	(b) Address (number and street)		
	(c) City, State, and ZIP Code		
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	(a) Name of Committee (in full)		
	(b) Address (number and street)		
	(c) City, State, and ZIP Code		



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ES PREPARER	1/8/18 DATE PREPARED		

PREPARER (3/2015)